

11/29/01
JC923 U.S. PTO

Please type a plus sign (+) inside this box → ☐

PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

14174ROUS02U

First Inventor

Gordon KERR

Title

STREAM SWITCH FABRIC

Express Mail Label No.

JC955 U.S. PTO
10/29/11
10/29/11

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
 2. ☐ Applicant claims small entity status.
See 37 CFR 1.27.
 3. ☒ Specification [Total Pages (preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
 4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets - 5. Oath or Declaration [Total Pages - a. ☒ Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - b. ☐ DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No. _____ / _____

Prior application information.

Examiner _____

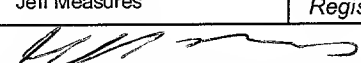
Group Art Unit _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

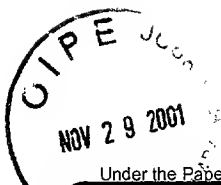
19. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or ☒ Correspondence address below

Name	Jeff Measures				
Address	c/o Nortel Networks Limited (IP Law Group)				
	P.O. Box 3511, Station C				
City	Ottawa	State	Ontario	Zip Code	K1Y 4H7
Country	Canada	Telephone	(613) 768-3003	Fax	(613) 768-3017

Name (Print/Type)	Jeff Measures	Registration No. (Attorney/Agent)	40,272
Signature		Date	November 28, 2001

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2002 <i>Patent fees are subject to annual revision.</i>		Complete if Known		
		Application Number		
		Filing Date		
		First Named Inventor	Gordon KERR	
		Examiner Name		
		Group Art Unit		
TOTAL AMOUNT OF PAYMENT (\$)		1032.00	Attorney Docket No.	14174ROUS02U

METHOD OF PAYMENT		FEE CALCULATION (continued)																													
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to. Deposit Account Number: 14-1315 Deposit Account Name: Nortel Networks Limited <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES																													
2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																															
FEE CALCULATION																															
1. BASIC FILING FEE																															
<table border="1"><thead><tr><th>Large Entity Fee Code (\$)</th><th>Small Entity Fee Code (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101 740</td><td>201 370</td><td>Utility filing fee</td><td>740.00</td></tr><tr><td>106 330</td><td>206 165</td><td>Design filing fee</td><td></td></tr><tr><td>107 510</td><td>207 255</td><td>Plant filing fee</td><td></td></tr><tr><td>108 740</td><td>208 370</td><td>Reissue filing fee</td><td></td></tr><tr><td>114 160</td><td>214 80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="3">SUBTOTAL (1)</td><td>(\$) 740.00</td></tr></tbody></table>		Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	101 740	201 370	Utility filing fee	740.00	106 330	206 165	Design filing fee		107 510	207 255	Plant filing fee		108 740	208 370	Reissue filing fee		114 160	214 80	Provisional filing fee		SUBTOTAL (1)			(\$) 740.00		
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid																												
101 740	201 370	Utility filing fee	740.00																												
106 330	206 165	Design filing fee																													
107 510	207 255	Plant filing fee																													
108 740	208 370	Reissue filing fee																													
114 160	214 80	Provisional filing fee																													
SUBTOTAL (1)			(\$) 740.00																												
2. EXTRA CLAIM FEES																															
<table border="1"><thead><tr><th>Total Claims</th><th>Extra Claims</th><th>Fee from below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>34</td><td>-20** = 14</td><td>X 18</td><td>= 252</td></tr><tr><td>3</td><td>-3** = 0</td><td>X 84</td><td>= 0</td></tr><tr><td colspan="3">Multiple Dependent</td><td></td></tr></tbody></table>		Total Claims	Extra Claims	Fee from below	Fee Paid	34	-20** = 14	X 18	= 252	3	-3** = 0	X 84	= 0	Multiple Dependent																	
Total Claims	Extra Claims	Fee from below	Fee Paid																												
34	-20** = 14	X 18	= 252																												
3	-3** = 0	X 84	= 0																												
Multiple Dependent																															
<table border="1"><thead><tr><th>Large Entity Fee Code (\$)</th><th>Small Entity Fee Code (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>103 18</td><td>203 9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>102 84</td><td>202 42</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>104 280</td><td>204 140</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>109 84</td><td>209 42</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>110 18</td><td>210 9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="3">SUBTOTAL (2)</td><td>(\$) 252.00</td></tr></tbody></table>		Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	103 18	203 9	Claims in excess of 20		102 84	202 42	Independent claims in excess of 3		104 280	204 140	Multiple dependent claim, if not paid		109 84	209 42	** Reissue independent claims over original patent		110 18	210 9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)			(\$) 252.00		
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid																												
103 18	203 9	Claims in excess of 20																													
102 84	202 42	Independent claims in excess of 3																													
104 280	204 140	Multiple dependent claim, if not paid																													
109 84	209 42	** Reissue independent claims over original patent																													
110 18	210 9	** Reissue claims in excess of 20 and over original patent																													
SUBTOTAL (2)			(\$) 252.00																												
*for number previously paid, if greater, For Reissues, see above		*Reduced by Basic Filing Fee Paid																													
		SUBTOTAL (3) (\$) 40.00																													

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Jeff Measures	Registration No (Attorney/Agent)	40,272
Signature		Telephone	(613) 768-3003
		Date	November 28, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.